

# SUFFIELD ATHLETIC HALL OF FAME SCHOLARSHIP APPLICATION

## Duration of Scholarship: One Year

Applicants are urged to complete this form as accurately and concisely as possible and to be prepared to supply additional information upon request. A High School transcript must accompany the application.

### Criteria:

- \_\_\_1. Must be a resident of Suffield or a student at Suffield High School.
- \_\_\_2. Must be a 2019 graduating senior.
- \_\_\_3. A High School transcript must accompany this application.
- \_\_\_4. Information sheet answering the questions below must accompany this application.
- \_\_\_5. Must have two letters of recommendation.
- \_\_\_6. Deadline is May 6, 2019.

The Suffield Athletic Hall of Fame will be awarding two (2) \$1000 scholarships.

This scholarship is awarded to someone who treats people fairly, has the respect of everyone and displays sportsmanship on the playing fields / arenas.

Name \_\_\_\_\_ Birthdate \_\_\_\_\_

High School \_\_\_\_\_

### Please answer the questions below on a separate sheet of paper and return with application.

1. Number of people in your family who are currently living at home. Number of family-supported brothers or sisters attending college.
2. List any activities and/or athletic activities in which you have been involved.
3. Awards, honors, or special recognitions you have received from school or the community.
4. What educational plans do you have following you High School graduation?
5. List any additional information about yourself you feel would be helpful in assessing you and your willingness to use financial aid in a productive manner.

**Donor Name:** Suffield Athletic Hall of Fame

**Address:** P.O. Box 314, West Suffield, CT 06093

**Final Decision made by:** SAHOF Awards Committee